

CLAIMS ONLY							Application Number 10519301		Filing Date			
							Applicant(s)					
CLAIMS							* May be used for additional claims or amendments					
AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT								
Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51					
2							52					
3							53					
4							54					
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43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep							Total Indep					
Total Depend	20						Total Depend					
Total Claims	21						Total Claims					

10/5/930

Filing Date

Applicant(s)

* May be used for additional claims or amendments